

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

OCT 23 2007

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Daryl Beall

Political Party (if applicable)

Democrat

Office Sought
Senate

District (if Senate or House)
25

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1361

WES

3-11-07

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Daryl Beall

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

10/23/07

I AM FILING A May 31, 2006 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED May 31, 2006 6-2-06
and amended 10-15-06
☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

20,920.32

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

11,970.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

32,890.32

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1,540.85

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

31,349.47

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

0.00

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

0.00

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/18/06	ID# CK#	Deborah Kelleher 2653 4th Ave No Ft Dodge, IA 50501		\$50	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Edward Friedmann PO Box C Redfield IA 50233		100	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Ernest Doeringsfield 7313 Twana Dr Urbandale IA 50322		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Jane Gibb 1408 12th Ave No Ft Dodge, IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Evon Martinsdale 150 Parkwood Circle Ft Dodge, IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	John Van Der Linden PO Box 275 Fort Dodge IA 50501		10	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Roger Nette 2015 N 22nd St Ft Dodge, IA 50501		100	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	E M Gunderson 2004 No 14th Ct Ft Dodge, IA 50501	OCT 23 2007	20	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Tito Trevino 1936 Stadium Dr Ft Dodge, IA 50501		250	<input checked="" type="checkbox"/>
05/18/06	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 605	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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✓ 05/18/06	ID# 6059 CK# 2745	Iowa Committee of Automotive Retailers 1111 Office Park Rd West Des Moines, IA 50265		\$250	✓
✓ 05/18/06	ID# 6052 CK# 2983	Independent Insurance Agents of IA 4000 Westown Pkwy Ste 200 West Des Moines IA 50265		250	✓
05/18/06	ID# CK#	Andrew Baumert 5068 Coachlight Dr West Des Moines IA 50265		50	✓
✓ 05/18/06	ID# 6107 CK# 3512	Qwest IPAC 925 High St Des Moines IA 50309		250	✓
✓ 05/18/06	ID# 6046 CK# 4103	Justice for All PAC 218 6th Ave Ste 526 Des Moines IA 50309		250	✓
✓ 05/18/06	ID# 6060 CK# 2377	IA Committee on Political Education AFL-CIO 2000 Walker Ste A Des Moines IA 50317		300	✓
✓ 05/18/06	ID# 6058 CK# 2756	IA Chiropractic Society 1605 N Ankeny Blvd Ste 100 Ankeny IA 50021		100	✓
✓ 05/18/06	ID# CK# 2015	Heavy Hwy PAC 2415 Ingersoll Ave Des Moines IA 50312		1000	✓
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$ 2450	
TOTAL (If last page of this schedule)				\$	

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Page 2 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

Receipt Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/18/06	ID# CK#	Anita Patterson 832 No 9th St Fort Dodge IA 50501		\$50	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Jean Borzich 803 N 21st St Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Benjamin Rogers 705 No 15th St Fort Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Sid Sandholm Box 228 Dayton IA 50530		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Joyce DeHaan 1173 Colonial Dr Fort Dodge IA 50501		250	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Ed Shinkal 1624 No 11th Ave Fort Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Tom Dawson 3001 Branch Ave Apt 338 Temple Hills MD 20748		150	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Robert Josten 801 Grand Ste 3900 Des Moines IA 50309		250	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 900	
TOTAL (If last page of this schedule)				\$	

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Page 3 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Secret Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND RAISER INCOME
05/18/06	ID# CK#	Janece Valentine 319 Woodmar Heights Fort Dodge IA 50501		\$250	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Ed O'Leary 1604 N 13th St Fort Dodge IA 50501		200	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Kathy Bocken 1385 No 14th St Fort Dodge IA 50501		250	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Michael Burke 1913 N 30th Ct Fort Dodge IA 50501		250	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Mark Marner 1510 Knollcrest Dr Fort Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Marianne Carlson 1415 8th Ave N Fort Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Paul Green 1221 N 24th Pl Fort Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Helen Miller 1936 15th Ave N Fort Dodge IA 50501	001 2 3 2007	25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Dan Payne 438 10th Ave N Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	John Wozniak 1841 7th Ave N Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1175	
TOTAL (If last page of this schedule)				\$	

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Page 4 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/18/06	ID# CK#	Janice Underwood 945 S 28th St Fort Dodge IA 50501		\$20	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	J E Allard 1486 20th Ave N Apt 50 Fort Dodge IA 50501		10	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Dave Hearn 1264 7th Ave No Fort Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Candie Becker 2727 N 15th Pl Fort Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Herb Conlon 1636 10th Ave N Fort Dodge IA 50501		100	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 330	
TOTAL (if last page of this schedule)				\$	

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Page 5 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/18/06	ID# CK#	Floyd Herum 1711 N 15th St Fort Dodge IA 50501		\$25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Donna Quade 233 6th Ave N Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Tara Van Brederode 2321 Bristol Dr Apt 205 Ames IA 50010		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Cynthia Kail 330 Gifford Ave Farmhamville IA 50538		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Donald Johnson 2710 Madison Ave Otho IA 50589		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Mari Trotter 1327 N 13th Pl Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Margaret Hasty 3140 16th Ave N Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Judy Payne 114 10th Ave No Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Garnita Johnson 1814 8th Ave N Fort Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/18/06	ID# CK#	Norma Brown 2222 Elmhurst Ave Fort Dodge IA 50501		20	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 245

TOTAL (if last page of this schedule)

\$

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Page 6 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS — MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

Receipt Form

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/20/06	ID# CK#	Claudia Koch 1203 N 8th St Ft Dodge IA 50501		\$25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Bob Bocken 2804 15th Ave N Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/20/06	ID# 6400 CK# 518	IA Restaurant Assn 8525 Douglas Ste 47 Des Moines IA 50322		150	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Ms Kermit Smith 2327 20th Ave N Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Jane Rogers 608 N 28th St Apt 10 Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Sharon Neumann 2916 25th Ave N Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	M J Fowler 1214 Fairway Cir Upland CA 91784		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Jeffrey Foreman 1511 1st Ave S Ft Dodge IA 50501	001 2 3 2007	100	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Tom Dawson 3001 Branch Ave Apt 338 Temple Hills MD 20748		100	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Barbara Johnson 1041 N 9th St Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 650	
TOTAL (if last page of this schedule)				\$	

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Page 2 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

SCHEDULE**A**

(Rev. 07/03)

**MONEY
RECEIPTS**☐ CHECK THIS BOX IF
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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND RAISER INCOME
05/20/06	ID# CK#	Irv Robinson 2183 160th St Ft Dodge IA 50501		\$100	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	L K Berryhill 1030 N 19th St Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Dennis Johnson 1246 N 24th Pl Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Mary Brown 421 N 27th St Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK# 7246	IA Democratic Party - Truman Fund 5661 Fleur Dr Des Moines IA 50321		1500	<input type="checkbox"/>
05/20/06	ID# 6021 CK# 1940	Credit Union PAC PO Box 10409 Des Moines IA 50306		1000	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Cash contributions		40	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Lois Dencklau 2021 N 14th Ct Ft Dodge IA 50501		30	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Curt Ruby PO Box 126 Badger IA 50516		35	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Norman Mundie 2270 235th St Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 2830	<input checked="" type="checkbox"/>
TOTAL (if last page of this schedule)				\$	

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Page 8 of 15
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

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DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/20/06	ID# CK#	Mary Beth Frischmeyer 1118 Colonial Dr Ft Dodge IA 50501		\$25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Barbara Rollins 2748 19th Ave N Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Beverly Davis 715 N 20th St Ft Dodge IA 50501		30	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Kristin Clark 1331 25th Ave N Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Barbara O'Connor 1110 Colonial Dr Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Janice Horton 1662 175th St Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Pam Lehman 1627 National Ave Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Thomas Roberts 1539 N 8th St Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Luke Quant 3843 8th Pl Des Moines IA 50313		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Michelle Bemrich 2766 18th Ave N Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 255

TOTAL (If last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 9 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/20/06	ID# CK#	Douglas Bailey PO Box 1 Webster City IA 50595		\$25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Mary Lou Wahby 1172 Foxridge Rd Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Dennis Barnum 1901 Main St Gowrie IA 50543		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Timothy Schott 1015 N 24th St Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Edward Woolsey 387 Kirkwood St Prole IA 50229		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	William Kerns 1301 10th Ave N Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Julie Packard Knutson 1256 N 11th St Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	William Dotzler 2837 Cedar Terrace DR Waterloo IA 50702		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Sandy Struecker 621 E St Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Larry Leiting 1503 12th Ave N Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 525	
TOTAL (If last page of this schedule)				\$	

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Page 10 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)**COMMITTEE NAME** (Must be same as on Statement of Organization)

People for Beall

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/20/06	ID# CK#	Andrea McGuire 10037 St Des Moines IA 50312		\$100	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Judith Gonzales 1021 N 24th Pl Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Tony Kniflong 723 7th Ave N Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Donna McAnally 2297 S River Lane Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Paul Dayton 3014 N Soldier Creek Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Toni Cochrane 1923 N 17th St Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Jerita Brokaw 1863 N Twin Lakes Rd Manson IA 50563		100	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 600	
TOTAL (If last page of this schedule)				\$	

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Page 11 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/20/06	ID# CK#	Lee Campbell 7998 Del Thomas Rd Smyrna TN 37167		\$30	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Katherine Peterson 304 W 4th St Harcourt IA 50544		10	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	William Drissel 524 N 28th St Ft Dodge IA 50501		250	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Edwina O'Parrell 227 S 12th St Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 390	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidates committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 12 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/20/06	ID# CK#	Dan Bednar 1307 S 28th St Ft Dodge IA 50501		\$25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Martha Bice 2231 22nd Ave N Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Bob Ronconi 130 N 9th St Ft Dodge IA 50501		30	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Kristin Fields 3536 380th St Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Marvin Berg 2200 100th St Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Vicki Harris 807 7th Ave N Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	George Savery 856 N 20th St Ft Dodge IA 50501		25	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	John Riebhoff 405 SW Elm Apt 302 Ankeny IA 50021		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Larry Bushman 1197 Colonial Dr Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
05/20/06	ID# CK#	Linda Brock 2430 170th St Ft Dodge IA 50501		50	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 330	
TOTAL (if last page of this schedule)				\$	

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Page 13 of 15
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
People for Beall

SCHEDULE

A

(Rev. 07/03)

MONETARY RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 88B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/28/06	ID# CK#	Berkley Bedell 4815 Aston Gardens Way B-201 Naples FL 34109		\$50	<input checked="" type="checkbox"/>
05/28/06	ID# CK#	Pamela Sanders 127 N 4th St Ft Dodge IA 50501		100	<input checked="" type="checkbox"/>
05/28/06	ID# CK#	Michelle Wright 4712 Admiralty Way Marina Del Rey CA 90292		25	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 175	
TOTAL (If last page of this schedule)				\$	

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Page 14 of 15
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
5/15/06	ID# CK# 1014	David Kling 420 Kenyon Road - #239 Fort Dodge, IA 50501		\$10	<input type="checkbox"/>
5/15/06	ID# CK# 1394	Kenneth Converse 610 W 4th Street Storm Lake, IA 50588		50	<input type="checkbox"/>
5/15/06	ID# CK# 9101	Bob Bocken P O Box 1313 Fort Dodge, IA 50501		100	<input type="checkbox"/>
5/15/06	ID# CK# 1184	Ted Huggins 1900 N 30th Court Fort Dodge, IA 50501		100	<input type="checkbox"/>
5/15/06	ID# CK# 3644	Tom & Norma Schmoker 2290 170th Street Fort Dodge, IA 50501		100	<input type="checkbox"/>
5/15/06	ID# CK# 2832	KP & DJ Russell Fort Dodge, IA 50501		100	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 460

TOTAL (if last page of this schedule)

\$ 11,970

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Page 15 of 15
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05.30.06	ID# 1361 CK# 2171	Carter Printing 1739 E Grand Ave Des Moines IA 50316	Campaign brochures	\$ 1159.64
05.30.06	ID# 1361 CK# 2172	Starlite Village 1518 3rd Ave NW Fort Dodge IA 50501	Room for fundraiser	381.21
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1540.85
TOTAL (if last page of this schedule)				\$ 1540.85

OCT 23 2007

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

People for Beall

Reset Form

SCHEDULE E (Rev. 08/97)	IN-KIND CONTRIBUTIONS
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☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7/05/05	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321		Mailings	\$ 57.46	<input checked="" type="checkbox"/>
12/05/05	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321		Event Phone Calls	387.03	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$	444.49

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)